PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUL EE

Commissioner for Patents
P.O. Box 1450

Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

| appropriate. All further con indicated unless corrected maintenance fee notification | rrespondence including the l below or directed otherwise ns. | Patent, advance or in Block 1, by (a) | lers and not | ification a new co | of maintenance fees vorrespondence address | vill be mailed ; and/or (b) inc | to the current licating a sep | correspondence address as arate "FEE ADDRESS" for | |
|---|---|---|---|------------------------------------|--|---|--|---|--|
| | CE ADDRESS (Note: Use Block 1 for 02/14/2006 | | 5 T 1 | . 26. | Fee(s) Transmittal. Th | is certificate ca Il naper, such a | nnot be used to s an assignment | or domestic mailings of the for any other accompanying ent or formal drawing, must | |
| MORRISON & I 1650 TYSONS BO SUITE 300 | FOERSTER LLP DULEVARD | Q. | APR 9.7 1 | THE THE PARTY OF | Cer I hereby certify that th States Postal Service v addressed to the Mai transmitted to the USP | tificate of Mai is Fee(s) Trans vith sufficient p I Stop ISSUE TO (571) 273-2 | ling or Trans mittal is being costage for fir FEE address 2885, on the c | smission g deposited with the United st class mail in an envelope above, or being facsimile late indicated below. | |
| MCLEAN, VA 22 4/28/2006 CNEGA2 00 | 102 000036 031352 | ôû | | | | | | (Depositor's name) | |
| | 00 DA 00 DA 00 DA | | | | | | | (Signature) | |
| APPLICATION NO. | FILING DATE | I | FIRST NAMED I | | FOR | ATTORNEY D | OCKET NO. | CONFIRMATION NO. | |
| 10/040,380 | 01/09/2002 Tal | | Takenor | ori Idehara | | 325772027600 | | 4165 | |
| MAGE FORMING DEVICE | | | | | | | - | | |
| | SMALL ENTITY | ISSUE FE | .E | PUBLICATION FEE | | TOTAL FE | | DATE DUE | |
| nonprovisional NO | | \$1400 | | \$300 | | \$1700 1 | | 05/15/2006 | |
| EXAMINER | | ART UNIT | | CL | ASS-SUBCLASS | | | · | |
| SINGH, SATWANT K | | 2626 | | | 358-001140 | | | | |
| I. Change of correspondence address or indication of "Fee Addre CFR 1.363). ☐ Change of correspondence address (or Change of Correspondence address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Cunumber is required. | | | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Morrison & Foerster LI | | | | | | |
| PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN Minolta Co | | elow, no assignee of this form is NOT | lata will app a substitute (B) RESIDE Osa | ear on the for filing ENCE: (Caka, | ne patent. If an assign an assignment. ITY and STATE OR C | COUNTRY) | | | |
| 4a. The following fee(s) are | | | | | 111 | | | | |
| Issue Fee | small entity discount permitte | Payment of Fec(s): ☐ A check in the amount of the fee(s) is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number | | | | | | | |
| | (from status indicated above | | □ | | lan ann alaimin a SMAI | LI ENTITY - | 6 17.6 | ED 1.27(.)(2) | |
| The Director of the USPTO NOTE: The Issue Fee and P | is requested to apply the Issu cublication Fee (if required) vords of the United States Pate | e Fee and Publicat | on Fee (if ar | | longer claiming SMAl e-apply any previouslan the applicant; a regi | | | | |
| Authorized Signature Albrah of Albale | | | | | Date_April 27, 2006 | | | | |
| Typed or printed name <u>Deborah S. Gladstein</u> | | | | Registration No. 43,636 | | | | | |
| in application. Confidential | on is required by 37 CFR 1.3 ity is governed by 35 U.S.C. oplication form to the USPT in reducing this burden, she into 2313-1450. DO NOT | 122 and 37 CFR 1 O. Time will vary | .14. This col | llection is | s estimated to take 12 r | ninutes to com | plete, includir | ng gathering, preparing, and | |

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.